



Jeffrey Smedberg <unionize@calcentral.com> on 07/15/2016 11:16:40 PM

To: 2022190174@fec.gov,  
cc:

Subject: Form 5 filing

Dear sirs,  
Please find attached Form 5 for Q2 2016.

Thanks,



-Jeffrey Smedberg Form5-Q2-2016\_JSmedberg.pdf

2016-07-18 00:00:00

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>Jeffrey Smedberg</b>	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <b>170 Hagemann Ave</b>	
(c) City, State and ZIP Code <b>Santa Cruz, CA 95062</b>	3. FEC Identification Number <b>C</b>
2. Occupation and Name of Employer (for Individual Filers Only)	

### 4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ 24-Hour Report

☐ October 15 Quarterly Report

☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on

5. COVERING PERIOD: FROM **04 01 2016**  
THROUGH **06 30 2016**

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES .....

**22921**

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

**Jeffrey Smedberg**

SIGNATURE

**Jeffrey Smedberg**

DATE

**7/15/16**

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. § 30103.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1 OF 1  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) <div style="font-size: 1.2em; font-family: cursive;">Jeffrey Smedberg</div>					
Full Name (Last, First, Middle Initial) of Payee <div style="font-size: 1.2em; font-family: cursive;">Community Printers, Inc.</div>			Date of Public Distribution/Dissemination <div style="font-size: 1.2em; font-family: cursive;">05 09 2016</div>		
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">1827 Soquel Ave</div>			Amount <div style="font-size: 1.2em; font-family: cursive;">229.21</div>		
City <div style="font-size: 1.2em; font-family: cursive;">Santa Cruz</div>		State <div style="font-size: 1.2em; font-family: cursive;">CA</div>		Zip Code <div style="font-size: 1.2em; font-family: cursive;">95062</div>	
Purpose of Expenditure <div style="font-size: 1.2em; font-family: cursive;">printed flyer</div>		Category/Type <div style="font-size: 1.2em; font-family: cursive;">004</div>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure:				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="font-size: 1.2em; font-family: cursive;">81468</div>					
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State		Zip Code	
Purpose of Expenditure		Category/Type		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure:				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought					
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State		Zip Code	
Purpose of Expenditure		Category/Type		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure:				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought					
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State		Zip Code	
Purpose of Expenditure		Category/Type		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure:				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought					
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures.....</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)</p> </div> <div style="text-align: right;"> <p><div style="font-size: 1.2em; font-family: cursive;">229.21</div></p> <p><div style="font-size: 1.2em; font-family: cursive;">0</div></p> <p><div style="font-size: 1.2em; font-family: cursive;">229.21</div></p> </div> </div>					

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <b>E-Mail</b>	Date of Receipt or Postmarked <b>7/15/16</b>

 PREPARER	<b>7/18/16</b> DATE PREPARED
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2016-07-18 PM 00:00:00